



**STATE OF WISCONSIN**  
**DEPARTMENT OF MILITARY AFFAIRS**  
**DIVISION OF EMERGENCY MANAGEMENT**

Brian Satula  
Administrator

Scott Walker  
Governor

**FFY12 Hazard Mitigation Assistance (HMA) Program**  
**Intent to Submit Subapplication Form**

The purpose of the form is to establish a jurisdiction's interest in the program, determine the type of application, and identify projects that are a priority to reduce or eliminate future damage or loss in the jurisdiction. Each mitigation program has its own specific eligibility and requirements. Please consult program guidance for details on the program from which you are seeking funds before completing and returning this document to Wisconsin Emergency Management. Provide supporting documentation that is pertinent to the proposed project.

<b>Applicant Type:</b>	
<input type="checkbox"/> Local Government	<input type="checkbox"/> Tribal Government
<input type="checkbox"/> Public/Tribal College or University	<input type="checkbox"/> Other:

<b>Type of Application:</b>	
<b>Mitigation Plan:</b>	<b>Mitigation Project (please describe):</b>
New Plan <input type="checkbox"/>	
Plan Update <input type="checkbox"/>	

<b>Contact Information</b>	
<b>Name/Address of Jurisdiction:</b>	<b>Contact Person:</b>
	<b>Phone Number:</b>
	<b>Email:</b>
	<b>Cost of Project/Plan (estimated): \$</b>

Please return this form no later than July 15, 2011 to:  
Wisconsin Emergency Management  
Roxanne Gray  
2400 Wright St.  
Madison, WI 53704